

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
Survey	408	1	0.41667	170
Total	408	1	0.41667	170

Dated: December 14, 2022.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

[FR Doc. 2022-27514 Filed 12-19-22; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities: Proposed Collection; Public Comment Request; of the Analysis of Senior Medicare Patrol Grantees' Program Implementation OMB Control Number 0985–New

AGENCY: Administration for Community Living, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing an opportunity for the public to comment on the proposed collection of information listed above. Under the Paperwork Reduction Act of 1995 (PRA), Federal agencies are required to publish a notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This Information Collection (IC) solicits comments on the information collection requirements relating to the Analysis of Senior Medicare Patrol Grantees' Program Implementation.

DATES: Comments on the collection of information must be submitted electronically by 11:59 p.m. (EST) or postmarked by February 21, 2023.

ADDRESSES: Submit electronic comments on the collection of information to: Kristen Robinson, Kristen.Robinson@acl.hhs.gov, 202-795-7428. Submit written comments on the collection of information to Administration for Community Living, 330 C Street SW, Washington, DC 20201, Attention: Kristen Robinson.

FOR FURTHER INFORMATION CONTACT:

Kristen Robinson, Kristen.Robinson@acl.hhs.gov, 202-795-7428.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. The PRA requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, ACL is publishing a notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, ACL invites comments on our burden estimates or any other aspect of this collection of information, including:

(1) whether the proposed collection of information is necessary for the proper performance of ACL's functions, including whether the information will have practical utility;

(2) the accuracy of ACL's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used to determine burden estimates;

(3) ways to enhance the quality, utility, and clarity of the information to be collected; and

(4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology.

Under ACL's Office of Healthcare Information and Counseling, the Senior Medicare Patrol (SMP) programs recruit and train a national network of staff and volunteers to help “prevent, detect, and

report Medicare fraud, errors, and abuse.”¹ The SMP supports programs in every state, the District of Columbia, and in U.S. territories through grants. Additionally, the SMP Resource Center, established in 2003, assists SMP grantees in networking and provides tools, training, and technical assistance to SMPs. To promote and advance equity in its programming, ACL is conducting interviews with SMP program directors or their designee to better understand their activities and their experiences in program implementation and in reaching low-income and rural Medicare beneficiaries.

Specifically, this IC will allow ACL to understand (1) how SMP grantees conceive of program priorities; (2) successes and challenges SMP grantees experience in implementing activities and in reaching low-income and rural Medicare beneficiaries; and (3) which programs need clarification on programmatic priority expectations or additional support to conduct their activities.

Up to 54 SMP grantee representatives and one SMP Resource Center representative will be invited to participate in a 75-minute web-based interview. Findings from the interviews will inform ACL's strategy to support SMP grantees in achieving program priorities and to promote equitable access to SMP activities for low-income and rural Medicare beneficiaries.

The proposed data collection tools may be found on the ACL website for review at <https://www.acl.gov/about-acl/public-input>.

Estimated Program Burden: ACL estimates the burden of this collection of information as follows:

A maximum of 54 SMP grantee project directors or their designees and one representative from the SMP Resource Center are expected to participate in interviews over videoconferencing. The approximate burden for participation in interviews is 1.25 hours per respondent for a total estimate of 68.75 hours.

¹ Administration for Community Living. (2022, November 8). *Senior Medicare Patrol (SMP)*.

Available at <https://acl.gov/programs/protecting->

[rights-and-preventing-abuse/senior-medicare-patrol-smp](https://acl.gov/programs/protecting-rights-and-preventing-abuse/senior-medicare-patrol-smp).

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Annual burden hours
Interviews with grantees	55	1	1.25	68.75
Total	55	1	1.25	68.75

Dated: December 14, 2022.

Alison Barkoff,

Acting Administrator and Assistant Secretary for Aging.

[FR Doc. 2022-27513 Filed 12-19-22; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meeting of the National Advisory Council on the National Health Service Corps

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the National Advisory Council on the National Health Service Corps (NACNHSC) will hold public meetings for the 2023 calendar year (CY). Information about NACNHSC, agendas, and materials for these meetings can be found on the NACNHSC website at <https://www.hrsa.gov/advisory-committees/national-health-service-corps>

DATES: NACNHSC meetings will be held on:

- March 21, 2023, 9:00 a.m.-5:00 p.m. Eastern Time (ET) and March 22, 2023, 9:00 a.m.-2:00 p.m. ET;
- June 27, 2023, 9:00 a.m.-5:00 p.m. ET and June 28, 2023, 9:00 a.m.-2:00 p.m. ET; and
- November 14, 2022, 9:00 a.m.-5:00 p.m. ET and November 15, 2022, 9:00 a.m.-2:00 p.m. ET.

ADDRESSES: Meetings may be held in-person, by teleconference, and/or ZOOM. For updates on how the meeting will be held, visit the NACNHSC website 30 business days before the date of the meeting, where instructions for joining meetings either in-person or remotely will be posted. In-person NACNHSC meetings will be held at 5600 Fishers Lane, Rockville, Maryland 20857. For meeting information updates, go to the meetings page on the NACNHSC website at <https://www.hrsa.gov/advisory-committees/national-health-service-corps/meetings>.

FOR FURTHER INFORMATION CONTACT:

Diane Fabiyi-King, Designated Federal Official, Division of National Health Service Corps, HRSA, 5600 Fishers Lane, Room 14N23, Rockville, Maryland 20857; phone (301) 443-3609; or NHSCAdvisoryCouncil@hrsa.gov.

SUPPLEMENTARY INFORMATION: The NACNHSC consults with, advises, and makes recommendations to the Secretary of Health and Human Services (Secretary) with respect to the Secretary's responsibilities in carrying out *Subpart II*, part D of title III of the Public Health Service Act (42 U.S.C. 254d-254k), as amended, including the designation of areas of the United States with health professional shortages and assignment of National Health Service Corps (NHSC) clinicians to improve the delivery of health services in health professional shortage areas. Since priorities dictate meeting times, be advised that start times, end times, and agenda items are subject to change.

For CY 2023 meetings, agenda items may include, but are not limited to, the identification of NHSC priorities for future program issues and concerns; proposed policy changes by using the varying levels of expertise represented on the NACNHSC to advise on specific program areas; updates from clinician workforce experts; and education and practice improvement in the training development of primary care clinicians. More general items may include presentations and discussions on the current and emerging needs of the health workforce; public health priorities; health care access and evaluation; NHSC-approved sites; HRSA priorities and other federal health workforce and education programs that impact the NHSC.

Refer to the NACNHSC website listed above for all current and updated information concerning the CY 2023 NACNHSC meetings, including draft agendas and meeting materials that will be posted 30 calendar days before the meeting.

Members of the public will have the opportunity to provide comments. Public participants may submit written statements in advance of the scheduled meeting(s). Oral comments will be honored in the order they are requested and may be limited as time allows. Requests to submit a written statement

or make oral comments to the NACNHSC should be sent to Diane Fabiyi-King using the contact information above at least 5 business days before the meeting date(s).

Individuals who need special assistance or another reasonable accommodation should notify Diane Fabiyi-King using the contact information listed above at least 10 business days before the meeting(s) they wish to attend. If a meeting is held in-person, it will occur in a federal government building, and attendees must go through a security check to enter the building. Non-U.S. Citizen attendees must notify HRSA of their planned attendance at an in-person meeting at least 20 business days prior to the meeting in order to facilitate their entry into the building. All attendees are required to present government-issued identification prior to entry.

Maria G. Button,

Director, Executive Secretariat.

[FR Doc. 2022-27532 Filed 12-19-22; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meeting of the Advisory Committee on Interdisciplinary, Community-Based Linkages

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: In accordance with the Federal Advisory Committee Act, this notice announces that the Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL) will hold public meetings for the 2023 calendar year (CY). Information about ACICBL, agendas, and materials for these meetings can be found on the ACICBL website at <https://www.hrsa.gov/advisory-committees/interdisciplinary-community-linkages>.

DATES: ACICBL meetings will be held on: